Fill in this information to identify	y your case:
United States Bankruptcy Court for the:  EASTERN DIST. OF PENNSYLVANIA	A
Case number (if known):	Chapter you are filing under:  Chapter 7 Chapter 11 Chapter 12 Chapter 13

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		, , , ,
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Timothy First Name  John Middle Name	Clara First Name  M. Middle Name
		Keer	Keer
	Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Last Name Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	First Name	First Name
	Include your married or	Middle Name	Middle Name
	maiden names.	Last Name	Last Name
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx - xx - 4 9 5 3  OR  9xx - xx	xxx - xx - 2 7 7 0  OR  9xx - xx
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	✓ I have not used any business names or EINs. Business name	✓ I have not used any business names or EINs Business name
	Include trade names and	Business name	Business name

Business name

Business name

Debtor 1 Case 16-10933-6	elf Doc 1 Filed 02/13/16 Entered	1 02/13/16 06:50:22 Desc Main 35 number (if known)				
First Name	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):				
	EIN					
5. Where you live		If Debtor 2 lives at a different address:				
	921 Haldeman Rd Number Street	921 Haldeman Rd Number Street				
	Schwenksville PA 19473 City State ZIP Code	Schwenksville PA 19473 City State ZIP Code				
	Montgomery	Montgomery				
	County	County				
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.				
	921 Haldeman Rd					
	Number Street	Number Street				
	P.O. Box	P.O. Box				
	Schwenksville PA 19473 City State ZIP Code	City State ZIP Code				
Why you are choosing     this district to file for	Check one:	Check one:				
bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.				
	I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)				
Part 2: Tell the Court	About Your Bankruptcy Case					
7. The chapter of the Bankruptcy Code you	Check one: (For a brief description of each, see No for Bankruptcy (Form 2010)). Also, go to the top of	otice Required by 11 U.S.C. § 342(b) for Individuals Filing page 1 and check the appropriate box.				
are choosing to file under	Chapter 7					
	— Chapter 11					
	Chapter 12					
	☑ Chapter 13					

Deb	tor 1 Case 16-10933-6 First Name	elf_Doc 1 Middle Name	Filed 02/13/16 Dostingent P	Entered <del>age</del> 3 of	02/13/16 06:50 se number (if known)	):22 Desc	C Main 2/12/2016 01:48:55pm			
8.	How you will pay the fee	court f pay wi	pay the entire fee when I fi or more details about how y th cash, cashier's check, or , your attorney may pay with	/ou may pay. ∃ money order.	Typically, if you are pa If your attorney is sub	ying the fee you mitting your pay	rself, you may			
			to pay the fee in installmouluries to Pay Your Filing Fee	•			application for			
		By law than 1 fee in	I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.							
9.	Have you filed for bankruptcy within the	□ No								
	last 8 years?	✓ Yes.								
		District Ea	stern District of PA		When <u>12/13/2012</u> MM / DD / YYYY	Case number	12-21488-jkf			
		District			When MM / DD / YYYY	Case number				
		District			When MM/DD/YYYY	Case number				
10.	Are any bankruptcy	<b>☑</b> No								
	cases pending or being filed by a spouse who is	Yes.								
	not filing this case with you, or by a business	Debtor			Relations	nip to you				
	partner, or by an	District								
	affiliate?				MM / DD / YYYY					
		Debtor			Relations	nip to you				
		District			When	Case number,				
					MM / DD / YYYY					
11.	Do you rent your residence?	✓ No. ☐ Yes.	Go to line 12. Has your landlord obtained residence?	I an eviction jud	dgment against you ar	nd do you want to	o stay in your			
			<ul><li>No. Go to line 12.</li><li>Yes. Fill out Initial Sta</li></ul>	atement About	an Eviction Judgment	Against You (Fo	orm 101A)			

and file it with this bankruptcy petition.

	Are you a sole proprietor	ny Bu ☑		Sses You Own as a Sole Proprietor  Go to Part 4.		
	of any full- or part-time business?		Yes.	Name and location of business		
	A sole proprietorship is a business you operate as an			Name of business, if any		
	individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			Number Street		
	If you have more than one sole proprietorship, use a			City	State	ZIP Code
	separate sheet and attach it to this petition.			Check the appropriate box to describe your business	);	
	to the petition.			Health Care Business (as defined in 11 U.S.C.	- ' ' ' ' '	
				☐ Single Asset Real Estate (as defined in 11 U.S. ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A		3))
				Stockbroker (as defined in 11 U.S.C. § 101(53A) Commodity Broker (as defined in 11 U.S.C. § 10 None of the above		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i>	can mos	set ap st rece	filing under Chapter 11, the court must know whether yopropriate deadlines. If you indicate that you are a smant balance sheet, statement of operations, cash-flow statement of operations, cash-flow statement of operations.	all business of tatement, and	debtor, you must attach your d federal income tax return
	debtor?	$\overline{\mathbf{V}}$	No.	I am not filing under Chapter 11.		
	For a definition of small business debtor, see		No.	I am filing under Chapter 11, but I am NOT a small be the Bankruptcy Code.	usiness debt	or according to the definition in
	11 U.S.C. § 101(51D).		Yes.	I am filing under Chapter 11 and I am a small busine Bankruptcy Code.	ss debtor acc	cording to the definition in the
P	art 4: Report If You Ov	vn o	r Hav	e Any Hazardous Property or Any Propert	y That Ne	eds Immediate Attention
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable		No Yes.	What is the hazard?		
	hazard to public health or safety? Or do you own any property that needs immediate attention?			If immediate attention is needed, why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			Where is the property?		
				City		State ZIP Code

## Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

**About Debtor 1:** 

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about	ıt
credit counseling because of:	

Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

ا	l am not requi	red to	receive	a bri	efing	about
_ (	credit counse	ling be	cause o	of:		

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 16-10933-elf Doc 1 Filed 02/13/16 Entered 02/13/16 06:50:22 Desc Main Regression Note: Page 6 of 57 number (if known) 02/12/2016 01:48:55pm

P	art 6: Answer These C	Question	ns for Reporting Pu	rpos	ses					
16.	What kind of debts do you have?	<ul> <li>16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8 as "incurred by an individual primarily for a personal, family, or household purpose."</li> <li>No. Go to line 16b.</li> <li>✓ Yes. Go to line 17.</li> </ul>								
		!	16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.  ☐ No. Go to line 16c. ☐ Yes. Go to line 17.							
		16c.	State the type of debts yo	u ow	e that are not consumer or bu	sines	s debts.			
17.	Are you filing under Chapter 7?	✓ No	o. I am not filing under	Chap	oter 7. Go to line 18.					
	Do you estimate that after any exempt property is	☐ Ye			•	-	xempt property is excluded and to distribute to unsecured creditors?			
	excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?		□ No □ Yes							
18.	How many creditors do you estimate that you owe?	50 10	49 0-99 00-199 00-999		1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000			
19.	How much do you estimate your assets to be worth?	□ \$5 ☑ \$1	0-\$50,000 50,001-\$100,000 100,001-\$500,000 500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion			
20.	How much do you estimate your liabilities to be?	□ \$5 ☑ \$1	0-\$50,000 50,001-\$100,000 100,001-\$500,000 500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion			
P	art 7: Sign Below									
For	you	I have	•	ıd I d	eclare under penalty of perjur	y that	the information provided is true			
		or 13 o		•			if eligible, under Chapter 7, 11, 12, der each chapter, and I choose to			
			• •		I not pay or agree to pay some		who is an attorney to help me fill .S.C. § 342(b).			
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.								
		I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.								
			Timothy John Keer		X /s/ CI					
		Tim	othy John Keer, Debtor 1	M. Ke	er, Debtor 2					

Executed on **02/12/2016** 

MM / DD / YYYY

Executed on **02/12/2016** 

MM / DD / YYYY

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

X

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ John L. McClain		Date	02/12/2016		
Signature of Attorney for Debtor			MM / DD / YYYY		
John L. McClain					
Printed name					
John L. McClain and Associates					
Firm Name					
PO Box 123					
Number Street					
Narberth	PA		19072		
City	State		ZIP Code		
(0.47) 000 0077					
Contact phone (215) 893-9357	Email address <b>a</b>	aamo	cclain@aol.com		
56081			_		
Bar number	State				

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			Document Page 8 of	<b>5</b> 7	02/12/2010 01:46:50
Fill in this inf	formation to i	dentify your c	ase and this filing:		
Debtor 1	Timothy	John	Keer		
	First Name	Middle Name	Last Name		
Debtor 2	Clara	М.	Keer		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	inkruptcy Court for	r the: <b>EASTERN</b>	DIST. OF PENNSYLVANIA		
Case number				☐ Check	if this is an
(if known)				<b>—</b>	ded filing
Official Form	106A/B				
Schedule A	/B: Property	У			12/15
filing together, bo sheet to this form  Part 1: De	oth are equally re n. On the top of a scribe Each R	sponsible for su ny additional pa Residence, Bu	st. Be as complete and accurate a pplying correct information. If mo ges, write your name and case nuite ilding, Land, or Other Real I erest in any residence, building, la	re space is needed, attach a mber (if known). Answer even	separate ery question.
	to Part 2. nere is the propert	y?			
1.1.  921 Haldeman F Street address, if avail		Chec	is the property? k all that apply. Single-family home	Do not deduct secured cla amount of any secured cla Creditors Who Have Clain	
		🗀 :	Ouplex or multi-unit building Condominium or cooperative	Current value of the entire property?	Current value of the portion you own?
Schwenksville		473	Manufactured or mobile home	\$272,082.00	\$272,082.00
County	State ZIF		and nvestment property Timeshare Other	Describe the nature of you interest (such as fee sim entireties, or a life estate	ple, tenancy by the
County		<u></u>	has an interest in the preparty?	Residence	
home		Chec	has an interest in the property? k one.		
		<u> </u>	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anoth	Check if this is comm (see instructions)	nunity property
			r information you wish to add abo erty identification number:	ut this item, such as local	_
	-	•	r all of your entries from Part 1, in . Write that number here	- · ·	\$272,082.00
Part 2: De	scribe Your V	ehicles			
-		•	est in any vehicles, whether they a icle, also report it on Schedule G:	_	•
3. Cars, vans, to	rucks, tractors, s	port utility vehic	les, motorcycles		
□ No ☑ Yes					

Official Form 106A/B Schedule A/B: Property page 1

C Debtor 1	ase 16- Timothy		1			02/13/16 06:50:22 7 number (if known)	Desc Main 02/12/2016 01:48:56
3.1. Make: Model:		LS Saturn		no has an interest in the eck one.	property?	Do not deduct secured clair amount of any secured clair Creditors Who Have Claims	ms on Schedule D:
Year:		2000				Current value of the	Current value of the
	ite mileage:				•	entire property?	portion you own?
Other infor		170,000		At least one of the debto	ors and another	\$500.00	\$500.00
car	mation.			Check if this is commu (see instructions)	nity property		
3.2. Make:		Contour		no has an interest in the eck one.	property?	Do not deduct secured clair amount of any secured clair Creditors Who Have Claims	ms on Schedule D:
Model:		Ford		<b>D</b> 14 0 1			
Year:		95	回回		nly	Current value of the entire property?	Current value of the portion you own?
Approxima	ite mileage:	170,000			•	\$600.00	\$600.00
Other infor	mation:			Check if this is commu (see instructions)			
3.3. Make:		s10		no has an interest in the eck one.	property?	Do not deduct secured clair amount of any secured clair	ms on Schedule D:
Model:		chevy				Creditors Who Have Claims	
Year:		2003			nlv	Current value of the entire property?	Current value of the portion you own?
Approxima	ite mileage:	199,000			-	\$800.00	\$800.00
Other infor	mation:		_				
ruck				Check if this is commu (see instructions)	nity property		
3.4. Make:		altima		no has an interest in the eck one.	property?	Do not deduct secured clair amount of any secured clair	ms on Schedule D:
Model:		nissan		Dalitan O a ala		Creditors Who Have Claims	
rear:		98			nly	Current value of the entire property?	Current value of the portion you own?
Approxima	te mileage:	215,000		At least one of the debto	•	\$600.00	\$600.00
Other infor car	mation:			Check if this is commu			
3.5. Make:				no has an interest in the eck one.	property?	Do not deduct secured clair amount of any secured clair	ms on Schedule D:
Model:						Creditors Who Have Claims	
rear:					nlv	Current value of the entire property?	Current value of the portion you own?
Approxima	ite mileage:			At least one of the debto	•	\$850.00	\$850.00
Other infor		. , ,	_				
	registered	d cars/parts		Check if this is commu (see instructions)			
3.6.		fath		no has an interest in the	property?	Do not deduct secured clair	•
√lake:		fat boy		eck one.  Debtor 1 only		amount of any secured clair Creditors Who Have Claims	
Model:		Harley	. 📙			Current value of the	Current value of the
rear:		05	$\square$	!	nly	entire property?	portion you own?
Approxima	ite mileage:	54,000		At least one of the debto	rs and another	\$3,500.00	\$3,500.00
Other infor							
noto cyc	ele			Check if this is commu (see instructions)	nity property		
				d other recreational vehicatercraft, fishing vessels,			
☑ N							

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Debtor 1 Timothy John Dokement Page 10 of 5-7 humber (if known)

First Name Middle Name Last Name

Last Name

	First Name Middle Name Last Name	
5.	Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here	\$6,850.00
Р	art 3: Describe Your Personal and Household Items	
Do	you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Household goods and furnishings  Examples: Major appliances, furniture, linens, china, kitchenware	
	☐ No ☐ Yes. Describe misc furnishings	\$1,000.00
7.	Electronics  Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games	
	✓ No ☐ Yes. Describe	
8.	Collectibles of value  Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
	✓ No  Yes. Describe	
9.	Equipment for sports and hobbies  Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
	✓ No  Yes. Describe	
10.	Firearms  Examples: Pistols, rifles, shotguns, ammunition, and related equipment	
	No  Yes. Describe 2 rifles	\$400.00
11.	Clothes  Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories  No	
40	Yes. Describe misc clothing	\$500.00
12.	Jewelry  Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver	
	No ✓ Yes. Describe misc jewelry	\$500.00
13.	Non-farm animals  Examples: Dogs, cats, birds, horses	
	✓ No  Yes. Describe	
14.	Any other personal and household items you did not already list, including any health aids you did not list	
	✓ No  Yes. Give specific information	
15.	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write the number here	\$2,400.00

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Debtor 1

**Timothy** First Name

John Middle Name Dokement Last Name

Page 11 of 5-7 number (if known)

Part 4: **Describe Your Financial Assets** 

Do :	you own or have any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash  Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition	
	<ul><li>✓ No</li><li>✓ Yes</li></ul>	
17.	Deposits of money  Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.	
	□ No ☑ Yes Institution name:	
	17.1. Checking account: wells fargo	\$120.00
18.	Bonds, mutual funds, or publicly traded stocks  Examples: Bond funds, investment accounts with brokerage firms, money market accounts	
	No  ✓ Yes Institution or issuer name:	
	Monroe stocks	\$800.00
19.	Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture	
	✓ No  Yes. Give specific information about them	
20.	Government and corporate bonds and other negotiable and non-negotiable instruments  Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.  Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.	
	✓ No  Yes. Give specific information about them	
21.	Retirement or pension accounts  Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
	✓ No  Yes. List each account separately. Type of account: Institution name:	
22.	Security deposits and prepayments  Your share of all unused deposits you have made so that you may continue service or use from a company  Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others	
	✓ No  ☐ Yes Institution name or individual:	
23.	Annuities (A contract for a specific periodic payment of money to you, either for life or for a number of years)	
	✓ No  ☐ Yes Issuer name and description:	
24.	Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition pro 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	ogram.
	✓ No  ☐ Yes	§ 521(c)

Deb	tor 1 Timothy John		Page 12 ofa 5e humber (if known)		02/12/2016 01:48:56pm
25.	First Name Middle  Trusts, equitable or future interes		ing listed in line 1), and rights or		
	powers exercisable for your bene		,, ,		
	✓ No  Yes. Give specific information about them				
26.	Patents, copyrights, trademarks, t Examples: Internet domain names,				
	<ul><li>✓ No</li><li>✓ Yes. Give specific information about them</li></ul>				
27.	Licenses, franchises, and other general Examples: Building permits, exclusions	_	tion holdings, liquor licenses, professio	nal licens	ses
	✓ No  Yes. Give specific information about them				
Mor	ney or property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you				
	<ul><li>✓ No</li><li>✓ Yes. Give specific information</li></ul>			Federal	\$0.00
	about them, including whether you already filed the returns			State:	\$0.00
	and the tax years			Local:	\$0.00
29.	Family support				
	No No	limony, spousal support, child sup	pport, maintenance, divorce settlement,	property	settlement
	Yes. Give specific information		Alimony:		\$0.00
			Maintenan	ce:	\$0.00
			Support:		\$0.00
			Divorce se	ttlement:	\$0.00
			Property se	ettlement	\$0.00
30.			enefits, sick pay, vacation pay, workers made to someone else	1	
	<ul><li>✓ No</li><li>Yes. Give specific information</li></ul>				
31.	•	insurance; health savings accour	at (HSA); credit, homeowner's, or renter	's insurar	nce
	✓ No  Yes. Name the insurance company of each policy and list its value	ompany name:	Beneficiary:	Su	rrender or refund value:
32.	Any interest in property that is du If you are the beneficiary of a living entitled to receive property because	trust, expect proceeds from a life			
	✓ No ✓ Yes. Give specific information				

	Case 16-1093		Filed 02/13/16		Desc Main 02/12/2016 01:48:56pr
Deb	tor 1 Timothy First Name	John Middle Name	Dolcement  Last Name	Page 13 ofase humber (if known)	02/12/2010 01.46.36pi
33.	Claims against third pa Examples: Accidents, en		=	uit or made a demand for payment nts to sue	
	<ul><li>✓ No</li><li>✓ Yes. Describe each</li></ul>	claim			
34.	rights to set off claims	ınliquidated claims o	of every nature, includi	ng counterclaims of the debtor and	
	<ul><li>✓ No</li><li>✓ Yes. Describe each</li></ul>	claim			
35.	Any financial assets yo	ou did not already lis	t		
	No ☐ Yes. Give specific in	nformation			
36.				ny entries for pages you have	\$920.00
Pa	art 5: Describe Any	/ Business-Relat	ed Property You O	wn or Have an Interest In. List any	real estate in Part 1.
37.	Do you own or have an	y legal or equitable	interest in any busines	s-related property?	
	<ul><li>No. Go to Part 6.</li><li>✓ Yes. Go to line 38.</li></ul>				
					Current value of the portion you own?  Do not deduct secured claims or exemptions.
38.	Accounts receivable or	commissions you a	lready earned		olamile er exempliere.
	<ul><li>✓ No</li><li>✓ Yes. Describe</li></ul>				
39.	•			copiers, fax machines, rugs, telephones,	
	✓ No ☐ Yes. Describe				
40.	Machinery, fixtures, eq	uipment, supplies ye	ou use in business, an	d tools of your trade	
	No ✓ Yes. Describe to	ols			\$2,469.00
41.	Inventory				
	<ul><li>✓ No</li><li>✓ Yes. Describe</li></ul>				
42.	Interests in partnership	os or joint ventures			
	✓ No ☐ Yes. Describe N	Name of entity:		% of ownership:	
43.	Customer lists, mailing	lists, or other comp	oilations		
	No Yes. Do your lists No Yes. Desc		dentifiable information	(as defined in 11 U.S.C. § 101(41A))?	
44.	Any business-related p	roperty you did not	already list		
	✓ No ✓ Yes. Give specific in	nformation.			

Deb	tor 1 Timothy John Dokement Page 14 of 57 humber (if known)  Last Name Last Name	Desc Main 02/12/2016 01:48:56pi
45.	Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here	\$2,469.00
P	Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an If you own or have an interest in farmland, list it in Part 1.	n Interest In.
46.	Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?	
	<ul><li>✓ No. Go to Part 7.</li><li>✓ Yes. Go to line 47.</li></ul>	
		Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm animals  Examples: Livestock, poultry, farm-raised fish	·
	✓ No  Yes	
48.	Cropseither growing or harvested	
	✓ No  Yes. Give specific information	
49.	Farm and fishing equipment, implements, machinery, fixtures, and tools of trade	
	✓ No  Yes	
50.	Farm and fishing supplies, chemicals, and feed	
	✓ No  Yes	
51.	Any farm- and commercial fishing-related property you did not already list	
	✓ No  Yes. Give specific information	
52.	Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here	\$0.00
P	art 7: Describe All Property You Own or Have an Interest in That You Did Not List Above	
53.	Do you have other property of any kind you did not already list?  Examples: Season tickets, country club membership	
	✓ No ☐ Yes. Give specific information.	
54.	Add the dollar value of all of your entries from Part 7. Write that number here	\$0.00

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Page 15 of 5-7 humber (if known) **Timothy Dokernent** Debtor 1 Middle Name

List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2..... \$272,082.00 56. Part 2: Total vehicles, line 5 \$6,850.00 57. Part 3: Total personal and household items, line 15 \$2,400.00 58. Part 4: Total financial assets, line 36 \$920.00 59. Part 5: Total business-related property, line 45 \$2,469.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 61. Part 7: Total other property not listed, line 54 \$0.00 Copy personal 62. Total personal property. Add lines 56 through 61...... \$12,639.00 \$12,639.00 property total \$284,721.00 63. Total of all property on Schedule A/B. Add line 55 + line 62.....

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Fill in this inf	ormation to	identify your case	:
Debtor 1	Timothy	John	Keer
	First Name	Middle Name	Last Name
Debtor 2	Clara	М.	Keer
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bar Case number	nkruptcy Court fo	or the: <b>EASTERN DIS</b>	T. OF PENNSYLVANIA
(if known)			-

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Р	art 1	:	Identify t	he Property You Cl	aim as Exempt				
1.		You You	u are claiming u are claiming	ions are you claiming? state and federal nonbar federal exemptions. 11 ulist on Schedule A/B to	nkruptcy exemptions. U.S.C. § 522(b)(2)	11 U.	· · · · · · ·	ŕ	
		•	otion of the p B that lists th	roperty and line on is property	Current value of the portion you own Copy the value from Schedule A/B	exe Che	ount of the mption you claim eck only one box for h exemption	Specific laws that allow exemption	
ho			ion nedule A/B:_	<u>1.1</u>	\$272,082.00		\$0.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(1)	
200 car	•	S Sa		x. 170000 miles)	\$500.00		\$500.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)	
<b>3</b>	Are icial F (Su	No Yes		omestead exemption of t on 4/01/16 and every 3 quire the property covere					age 1

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Debtor 1

**Timothy** John Document

First Name

Middle Name

Last Name

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	exe	ount of the mption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B		ck only one box for h exemption	
Brief description  95 Contour Ford (approx. 170000 miles)  car  Line from Schedule A/B:	\$600.00		\$600.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Brief description 2003 s10 chevy (approx. 199000 miles) truck Line from Schedule A/B:	\$800.00		\$800.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Brief description 98 altima nissan (approx. 215000 miles) car Line from Schedule A/B:	\$600.00		\$600.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Brief description mis. non registered cars/parts Line from Schedule A/B:	\$850.00		\$850.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Brief description 05 fat boy Harley (approx. 54000 miles) moto cycle Line from Schedule A/B:	\$3,500.00		\$3,500.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Brief description misc furnishings Line from Schedule A/B:6	\$1,000.00		\$1,000.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Brief description  2 rifles  Line from Schedule A/B:10	\$400.00		\$400.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Brief description misc clothing Line from Schedule A/B:11	\$500.00		\$500.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Brief description misc jewelry Line from Schedule A/B:12	\$500.00		\$500.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(4)

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Case number (if known)

Debtor 1

Document **Timothy** John First Name Middle Name Last Name

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description  wells fargo  Line from Schedule A/B:17.1	\$120.00	\$120.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Brief description  Monroe stocks  Line from Schedule A/B:18	\$800.00	\$800.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Brief description tools Line from Schedule A/B: 40	\$2,469.00	\$0.00 100% of fair market value, up to any applicable statutory	11 U.S.C. § 522(d)(5)

limit

Case 16-10933-elf Doc 1 Filed 02/13/16 Entered 02/13/16 06:50:22 Desc Main 02/12/2016 01:48:57pm Page 19 of 57 Document Fill in this information to identify your case: Debtor 1 Timothy John Keer Middle Name First Name Last Name Debtor 2 М. Clara Keer (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: **EASTERN DIST. OF PENNSYLVANIA** Case number Check if this is an (if known) amended filing Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below.  $\mathbf{M}$ Part 1: **List All Secured Claims** List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one Column A Column B Column C creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral Unsecured much as possible, list the claims in alphabetical order according to the Do not deduct the that supports this portion creditor's name. value of collateral claim If any Describe the property that 2.1 \$276,021.98 \$272,082.00 \$3,939.98 secures the claim: GREENTREE SERVICING LLC/ Ditect 345 ST. PETER STREET Street 1100 LANDMARK TOWERS As of the date you file, the claim is: Check all that apply. Contingent ST. PAUL MN 55102 Unliquidated State ZIP Code ☐ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply.

Add the dollar value of your entries in Column A on this page. Write that number here:

 $\overline{\mathbf{V}}$ 

Mortgage

\$276,021.98

☐ Debtor 1 only

П

Debtor 2 only

Debtor 1 and Debtor 2 only

Check if this claim relates to a community debt

Date debt was incurred

At least one of the debtors and another

An agreement you made (such as mortgage or secured car loan)

Statutory lien (such as tax lien, mechanic's lien)

Judgment lien from a lawsuit

Last 4 digits of account number

Other (including a right to offset)

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Desc Main

Column C

Unsecured

portion

If any

Debtor 1

**Timothy** First Name

Dokement Last Name

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02/12/2016 01:48:57pm

Column A Column B **Additional Page** Amount of claim Value of collateral Part 1: After listing any entries on this page, number them Do not deduct the that supports this sequentially from the previous page. value of collateral claim Describe the property that 2.2 \$2,469.00 \$2,469.00 secures the claim: **Snap On Crdt** tools

Creditor's name Attn: Bankruptcy Number Street 950 Technology Way Suite 301 As of the date you file, the claim is: Check all that apply. ☐ Contingent Libertyville 60048 Unliquidated ZIP Code Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. ☐ Debtor 1 only ☐ An agreement you made (such as mortgage or secured car loan) Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only П Judgment lien from a lawsuit At least one of the debtors and another П Other (including a right to offset)  $\overline{\mathbf{M}}$ Secured Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number 02/1994 3 3 3 Describe the property that 2.3 \$3,483.23 \$272,082.00 secures the claim: Unifund CCR LLC home Creditor's name 10625Techwoods Circle Street Number As of the date you file, the claim is: Check all that apply. ☐ Contingent Cincinnati ОН 45242 Unliquidated City Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. ☐ Debtor 1 only An agreement you made (such as mortgage or secured car loan) Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only Judgment lien from a lawsuit At least one of the debtors and another Other (including a right to offset) Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write that number here:

judgment Bucks County 2012-26907

\$5,952.23

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$281,974.21

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**Timothy** Debtor 1 First Name

John Middle Name **Dokernent** Last Name

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Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

1	Ditech Financial LLC			On which line in Part 1 did you enter the creditor?	2.1
	Name PO Box 6172 Number Street			Last 4 digits of account number	_
	Rapid City	SD State	<b>57709</b> ZIP Code	_	
2	KML Law Group, PC  Name 701 Market Street  Number Street			On which line in Part 1 did you enter the creditor?  Last 4 digits of account number	<u>2.1</u>
	Philadelphia City	PA State	<b>19106-1532</b> ZIP Code	_ _	
3	Raymond Kessler, Esquire  Name 644 Bloom Street  Number Street			On which line in Part 1 did you enter the creditor?  Last 4 digits of account number	2.3
	Danville City	PA State	<b>17821</b> ZIP Code	_ _	

Case 16-10933-elf Doc 1 Filed 02/13/16 Entered 02/13/16 06:50:22 Desc Main 02/12/2016 01:48:58pm Page 22 of 57 Document Fill in this information to identify your case: Debtor 1 Timothy John Keer Middle Name First Name Last Name Debtor 2 Clara М. Keer (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: **EASTERN DIST. OF PENNSYLVANIA** Case number ☐ Check if this is an (if known) amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). List All of Your PRIORITY Unsecured Claims Part 1: Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes.  $\square$ List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet. Total claim Priority Nonpriority

			amount	amount
2.1		\$6,000.00	\$6,000.00	\$0.00
John L. McClain and Associates Priority Creditor's Name PO Box 123 Number Street	Last 4 digits of account number  When was the debt incurred? 0	1/31/2016		
Narberth         PA         19072           City         State         ZIP Code	As of the date you file, the claim is     Contingent     Unliquidated     Disputed	: Check all that app	oly.	
Who incurred the debt? Check one.	Type of PRIORITY unsecured claim	1:		
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	<ul> <li>□ Domestic support obligations</li> <li>□ Taxes and certain other debts yo</li> <li>□ Claims for death or personal injuintoxicated</li> <li>☑ Other. Specify</li> <li>Attorney fees for this case</li> </ul>	•	ent	
✓ No ☐ Yes	•			

Case 16-10933-elf Doc 1 Filed 02/13/16 Entered 02/13/16 06:50:22 Desc Main Page 23 of 57 Case number (if known) 02/12/2016 01:48:58pm Document Debtor 1 **Timothy** John First Name Last Name Middle Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with you other schedules. Yes  $\overline{\mathbf{Q}}$ List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If more space is needed for nonpriority unsecured claims, fill out the Continuation Page of Part 2. Total claim 4.1 \$388.00 **Credit One Bank Na** Last 4 digits of account number 8 0 1 5 Nonpriority Creditor's Name When was the debt incurred? 02/2015 PO Box 98873 As of the date you file, the claim is: Check all that apply. Number Street Contingent Unliquidated П Disputed Las Vegas NV 89193 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans ☐ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt Credit Card Is the claim subject to offset? **√** No Yes 4.2 \$570.00 **Fingerhut** Last 4 digits of account number 2 2 3 9 Nonpriority Creditor's Name When was the debt incurred? 12/2015 6250 Ridgewood Rd As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated Disputed St Cloud MN 56303 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts ☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

**☑** No Yes П

Other. Specify

**Charge Account** 

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Debtor 1

John

Document

Part 4:

First Name Middle Name

Last Name

# Add the Amounts for Each Type of Unsecured Claim

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a. <b>\$0.00</b>
	6b.	Taxes and certain other debts you owe the government	6b. <b>\$0.00</b>
	6c.	Claims for death or personal injury while you were intoxicated	6c. <b>\$0.00</b>
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	<sup>6d.</sup> <b>+\$6,000.00</b>
	6e.	<b>Total.</b> Add lines 6a through 6d.	6d. <b>\$6,000.00</b>
			Total claim
Total claims from Part 2	6f.	Student loans	6f. <b>\$0.00</b>
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. <b>\$0.00</b>
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h. <b>\$0.00</b>
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	<sup>6i.</sup> +\$958.00
	6j.	<b>Total.</b> Add lines 6f through 6i.	6j. <b>\$958.00</b>

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Fill in this info	ormation to i	dentify your case	:
Debtor 1	Timothy	John	Keer
	First Name	Middle Name	Last Name
Debtor 2	Clara	M.	Keer
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bar	nkruptcy Court fo	or the: <b>EASTERN DIS</b>	T. OF PENNSYLVANIA
Case number			
(if known)			

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1.	ро у	Do you have any executory contracts or unexpired leases?								
	$\overline{\mathbf{V}}$	No.	Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.							
		Yes	. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B)							

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

mg

Case 1	10-10933-611		cument F	Entereu 26 of		0.50.22		<b>I I</b> 16 01:48:58լ
Fill in this inf	formation to id	lentify your case						
Debtor 1	Timothy First Name	<b>John</b> Middle Name	Keer Last Name					
Debtor 2 (Spouse, if filing)	Clara First Name	M. Middle Name	Keer Last Name					
United States Ba	ankruptcy Court for	the: EASTERN DIS	ST. OF PENNSY	LVANIA				
Case number (if known)						_	c if this is an ded filing	
Official Form	106H							
Schedule H	: Your Code	btors						12/15
two married peop needed, copy the	ole are filing toget Additional Page,	ho are also liable fo her, both are equally fill it out, and numb Pages, write your r	y responsible for er the entries in	supplying co	rrect information he left. Attach tl	n. If more s <sub>i</sub> he Addition	pace is al Page to this	
1. Do you have	any codebtors?	(If you are filing a jo	oint case, do not li	st either spous	e as a codebtor.)			

In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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Fill in this inforr	mation to identify	y your case:		
Debtor 1	Timothy First Name	<b>John</b> Middle Name	<b>Keer</b> Last Name	Check if this is:
Debtor 2 (Spouse, if filing)	Clara First Name	M. Middle Name	<b>Keer</b> Last Name	An amended filing
United States Bank	ruptcy Court for the:	EASTERN DIST	OF PENNSYLVANIA	A supplement showing postpetition chapter 13 income as of the following of
Case number (if known)				MM / DD / YYYY

#### Official Form 106I

### **Schedule I: Your Income**

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

State Zip Co

## Part 2: Give Details About Monthly Income

**Estimate monthly income as of the date you file this form.** If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1

For Debtor 2 or

				non-filing spouse
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$7,258.33	\$0.00
3.	Estimate and list monthly overtime pay.	3. 🖣	¥0.00	\$0.00
4.	Calculate gross income. Add line 2 + line 3.	4.	\$7,258.33	\$0.00

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Case number (if known)

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Debtor 1 Timothy

John

Document

First Name Middle Name Last Name For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here ..... \$0.00 \$7,258.33 List all payroll deductions: \$0.00 5a. Tax, Medicare, and Social Security deductions \$1,521.00 5a. \$0.00 \$0.00 5b. Mandatory contributions for retirement plans 5b. 5c. Voluntary contributions for retirement plans 5c. \$0.00 \$0.00 \$0.00 \$0.00 5d. Required repayments of retirement fund loans 5d. 5e. Insurance 5e. \$75.83 \$0.00 \$0.00 \$0.00 5f. Domestic support obligations 5f. \$0.00 \$0.00 5g. Union dues 5g. 5h. Other deductions. \$5.87 \$0.00 5h. + Specify: city wage tax Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f +\$0.00 \$1,602.70 5g + 5h. Calculate total monthly take-home pay. Subtract line 6 from line 4. \$5,655.63 \$0.00 List all other income regularly received: 8a. Net income from rental property and from operating a \$0.00 \$0.00 business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends \$0.00 \$0.00 8c. Family support payments that you, a non-filing spouse, or a \$0.00 \$0.00 8c. dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation b8 \$0.00 \$0.00 8e. Social Security 8e. \$0.00 \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any noncash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. Specify: \$0.00 \$0.00 8g. Pension or retirement income 8g. \$0.00 \$0.00 8h. Other monthly income. 8h. 🛓 Specify: \$0.00 \$0.00 **Add all other income.** Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. \$0.00 \$0.00 Calculate monthly income. Add line 7 + line 9. \$5,655.63 \$0.00 \$5,655.63 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. \$0.00 Specify: 11. 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly 12 \$5,655.63 income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, Combined if it applies. monthly income 13. Do you expect an increase or decrease within the year after you file this form? co-debtor to apply for disability Yes. Explain:

Case 16-10933-elf Doc 1 Filed 02/13/16 Entered 02/13/16 06:50:22 Desc Main 02/12/2016 01:48:59pm Page 29 of 57 Document Fill in this information to identify your case: Check if this is: An amended filing Debtor 1 Timothy John Keer Middle Name First Name Last Name A supplement showing postpetition chapter 13 expenses as of the Debtor 2 Clara М. Keer following date: (Spouse, if filing) Middle Name First Name Last Name United States Bankruptcy Court for the: EASTERN DIST. OF PENNSYLVANIA MM / DD / YYYY Case number (if known) Official Form 106J **Schedule J: Your Expenses** 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: **Describe Your Household** Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household?  $\overline{\mathbf{Q}}$ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. Do you have dependents?  $\square$ No Dependent's relationship to Dependent's Does dependent Yes. Fill out this information Do not list Debtor 1 and Debtor 1 or Debtor 2 age live with you? for each dependent..... Debtor 2. No Yes Do not state the dependents' No names. Yes No Yes Nο Yes No Do vour expenses include No expenses of people other than Yes yourself and your dependents? Part 2: **Estimate Your Ongoing Monthly Expenses** Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) Your expenses \$1,500.00 The rental or home ownership expenses for your residence. 4. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4a.

4b. Property, homeowner's, or renter's insurance4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

\$300.00

4b.

4c.

4d.

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Last Name

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Your expenses

Debtor 1 Timothy

First Name

John

Middle Name

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Additional mortgage payments for your residence, such as home equity loans 5. 5. **Utilities:** 6a. Electricity, heat, natural gas 6a. \$500.00 6b. Water, sewer, garbage collection 6b 6c. Telephone, cell phone, Internet, satellite, and 6c. \$1<u>50</u>.00 cable services 6d. 6d. Other. Specify: cell phones \$200.00 Food and housekeeping supplies 7. \$850.00 Childcare and children's education costs 8. Clothing, laundry, and dry cleaning 9. \$250.00 9. 10. Personal care products and services 10. \$250.00 11. Medical and dental expenses 11. \$300.00 Transportation. Include gas, maintenance, bus or train 12. \$470.00 fare. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, 13. \$250.00 magazines, and books 14. Charitable contributions and religious donations 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. 15b. Health insurance 15b. Vehicle insurance \$102.00 15c. 15d. Other insurance. Specify: 15d. 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a. 17b. Car payments for Vehicle 2 17b. Other. Specify: 17c. 17d. Other. Specify: 17d. 18. Your payments of alimony, maintenance, and support that you did not report as 18. deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Other payments you make to support others who do not live with you. 19. Specify: Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. 20h. Real estate taxes 20h. 20c. Property, homeowner's, or renter's insurance 20c. 20d. Maintenance, repair, and upkeep expenses 20d. 20e. Homeowner's association or condominium dues 20e

	C	ase 16-10933-	elf Doc 1	Filed 02/13/16	Entered	02/13/16 06:	50:22	Desc Main 02/12/2016 01:48:59pm
Deb		Timothy	John	Document I	aye 31 0	57 Case number (i	known)	·
		First Name	Middle Name	Last Name				
21.	Othe	r. Specify:				2	1. <b>+</b> .	
22.	Calcu	ulate your monthly ex	penses.				_	
	22a.	Add lines 4 through 2	21.			2	2a.	\$5,122.00
	22b.	Copy line 22 (monthl	y expenses for De	btor 2), if any, from Offic	cial Form 106J-2	2. 2	2b.	
	22c.	Add line 22a and 22b	o. The result is you	ur monthly expenses.		2	2c.	\$5,122.00
23.	Calcu	ulate your monthly ne	et income.					
	23a.	Copy line 12 (your co	ombined monthly in	ncome) from Schedule I.		2	.3a.	\$5,655.63
	23b.	Copy your monthly e	xpenses from line	22c above.		2	.3b	\$5,122.00
	23c.	Subtract your monthl The result is your mo		our monthly income.		2	3c	\$533.63
24.	Do y	ou expect an increase	e or decrease in y	our expenses within th	ne year after yo	ou file this form?		
			. , ,	or your car loan within the a modification to the term		. ,	je	
	_	Yes. Explain here:						

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Fill in this info	ormation to i	dentify your case	:
Debtor 1	Timothy	John	Keer
	First Name	Middle Name	Last Name
Debtor 2	Clara	M.	Keer
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bar	okruptov Court fo	r the: FASTERN DIS	T. OF PENNSYLVANIA
Officed States Dai	ikiupicy Court io	LASTERN DIS	T. OF TENIOTEVANIA
Case number			
(if known)			

### Official Form 106Sum

## **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

#### Part 1: Summarize Your Assets

		Your assets Value of what you own
۱.	Schedule A/B: Property (Official Form 106A/B)	
	1a. Copy line 55, Total real estate, from Schedule A/B	\$272,082.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$12,639.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$284,721.00
_		
۲	art 2: Summarize Your Liabilities	
ľ	art 2: Summarize Your Liabilities	Your liabilities Amount you owe
	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	Amount you owe
	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	Amount you owe \$281,974.21
	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D  Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$281,974.21 \$6,000.00

#### Part 3: Summarize Your Income and Expenses

4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$5,655.63
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$5,122.00

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Debtor 1

**Timothy** 

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

John

Page 33 of 57 number (if known)

First Name Middle Name

Last Name

9e. Obligations arising out of a separation agreement or divorce that you did not report as

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?							
	<ul><li>No. You have nothing to report on this part of the form. Check this box and submit this</li><li>✓ Yes</li></ul>	form to the court with your other schedules.						
7.	What kind of debt do you have?							
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.							
	Your debts are not primarily consumer debts. You have nothing to report on this part this form to the court with your other schedules.	t of the form. Check this box and submit						
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.							
9.	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:							
		Total claim						
	From Part 4 on Schedule E/F, copy the following:							
	9a. Domestic support obligations. (Copy line 6a.)	\$0.00						
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00						
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00						
	9d. Student loans. (Copy line 6f.)	\$0.00						

\$0.00

\$0.00

\$0.00

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		Dod	cument	Page 34 of 57	02/12/2016 01:49:02p
Fill in this inf	ormation to	identify your case	:		
Debtor 1	Timothy First Name	<b>John</b> Middle Name	Keer Last Name	3	
Debtor 2	Clara	M.	Keer		
(Spouse, if filing)	First Name	Middle Name	Last Name	•	
United States Bar Case number (if known)	nkruptcy Court fo	or the: <b>EASTERN DIS</b>	ST. OF PENN	SYLVANIA	Check if this is an amended filing
Official Form	106Dec				
Declaration	About an I	Individual Debt	tor's Sche	edules	12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT	an attorney to help you fill out bankruptcy forms?
<b>☑</b> No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119).
	Desidration, and digitative (emotion 113).
Under penalty of perjury, I declare that I have read true and correct.	the summary and schedules filed with this declaration and that they are
X /s/ Timothy John Keer	X /s/ Clara M. Keer
Timothy John Keer, Debtor 1	Clara M. Keer, Debtor 2
Date 02/12/2016	Date 02/12/2016
MM / DD / YYYY	MM / DD / YYYY

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		Doc	cument F	Page 35 of 57		02/12/2016 01:49:0
Fill in this inf	ormation to i	dentify your case				
Debtor 1	Timothy First Name	<b>John</b> Middle Name	Keer Last Name			
Debtor 2 (Spouse, if filing)	Clara First Name	M. Middle Name	Keer Last Name			
United States Ba	nkruptcy Court fo	r the: <b>EASTERN DIS</b>	ST. OF PENNS	<u> </u>		
Case number (if known)						Check if this is an amended filing
Official Form	107					
Statement o	f Financial	Affairs for Inc	dividuals Fi	ling for Bankrupt	су	12/15
correct information	on. If more space ase number (if kr	e is needed, attach a nown). Answer every	separate sheet to question.	ing together, both are equote this form. On the top of the top of the You Lived Befor	f any addition	
1. What is your  ☑ Married ☐ Not marrie	current marital s	status?				
☑ No	•	you lived anywhere o		you live now?		
Debtor 1:			ntes Debtor 1 ed there	Debtor 2:		Dates Debtor 2 lived there
				uivalent in a community p		-

Washington, and Wisconsin.)

Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

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Debtor 1

**Timothy** 

John

Dokement

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First Name Middle Name Last Name

Part 2: **Explain the Sources of Your Income** 

	☐ No ☑ Yes. Fill in the details.					
		Debtor 1		Debtor 2		
		Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions	
From January 1 of the current year until the date you filed for bankruptcy:		Wages, commissions, bonuses, tips	\$11,113.00	Wages, commissions, bonuses, tips		
		Operating a business		Operating a business		
For the last calendar year:  (January 1 to December 31, 2015 )  YYYY		✓ Wages, commissions, bonuses, tips	\$87,151.00	Wages, commissions, bonuses, tips		
		Operating a business		Operating a business		
For the calendar year before that:  (January 1 to December 31,		Wages, commissions, bonuses, tips	\$89,348.00	Wages, commissions, bonuses, tips		
		Operating a business		Operating a business		
5.	Did you receive any other income durin Include income regardless of whether that unemployment; and other public benefit pa and gambling and lottery winnings. If you Debtor 1.  List each source and the gross income from No Yes. Fill in the details.	income is taxable. Example ayments; pensions; rental incare in a joint case and you have	es of other income are come; interest; dividen- ave income that you re	ds; money collected from law eceived together, list it only c	vsuits; royalties;	

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Debtor 1

Timothy John

Dokement Page 37 of 5-7 number (if known)

	F	First Name	Middle Name	Last Name		
Pa	art 3:	List Ce	rtain Payments You M	ade Before You	Filed for Bankruptcy	
6.	Are eithe	er Debtor	1's or Debtor 2's debts prim	arily consumer deb	its?	
	□ No.		Debtor 1 nor Debtor 2 has p d by an individual primarily for	-	<b>debts.</b> Consumer debts are define or household purpose."	d in 11 U.S.C. § 101(8) as
		During th	ne 90 days before you filed fo	r bankruptcy, did you	u pay any creditor a total of \$6,225*	or more?
		□ No.	Go to line 7.			
		☐ Yes.	total amount you paid that co	editor. Do not includ	of \$6,225* or more in one or more in de payments for domestic support of payments to an attorney for this ban	bligations, such as
		* Subjec	t to adjustment on 4/01/16 ar	d every 3 years after	r that for cases filed on or after the o	date of adjustment.
	✓ Yes.	Debtor 1	l or Debtor 2 or both have p	rimarily consumer	debts.	
		During th	ne 90 days before you filed fo	r bankruptcy, did you	u pay any creditor a total of \$600 or	more?
		✓ No.	Go to line 7.			
		☐ Yes.		ments for domestic s	of \$600 or more and the total amousupport obligations, such as child suthis bankruptcy case.	
7.	Insiders corporati agent, in	include you ons of which cluding on	ur relatives; any general partr ch you are an officer, director	ners; relatives of any , person in control, o	ment on a debt you owed anyone general partners; partnerships of w r owner of 20% or more of their votii 11 U.S.C. § 101. Include payments	hich you are a general partner; ng securities; and any managing
	✓ No ☐ Yes.	List all pa	yments to an insider.			
8.		year befo d an insid		did you make any բ	payments or transfer any property	on account of a debt that
	Include p	ayments o	on debts guaranteed or cosigr	ned by an insider.		
	✓ No ☐ Yes.	List all pa	syments that benefited an insi	der.		
P	art 4:	Identify	/ Legal Actions, Repos	sessions, and F	oreclosures	
9.	List all su	uch matters			a any lawsuit, court action, or adm tions, divorces, collection suits, pate	
	□ No ☑ Yes.	Fill in the	details.			
			Nature of the	e case	Court or agency	Status of the case
Uni		r LLC vs.	credit Timothy		Mont. CCP Court Name	Pending
Kee	er				Number Street	On appeal

Official Form 107

Case number 2012-26907

Norristown

State

ZIP Code

City

✓ Concluded

D. I.			Intered 02/13/16 06:50:22	Desc Main 02/12/2016 01:49:03pm
Debt		n Dolkement Pag e Name Last Name	e 38 @fasæ7humber (if known)	' '
	e title en Tree Servicing vs. Keer othy and Clara	sheriff's sale scheduled 2/24/2016	MOnt CCP Court Name	Pending  On appeal
	omy and olara		Number Street	<b>–</b> ···
Case	number 2013-31113		Norristown City State ZIP C	Concluded
	seized, or levied? Check all that apply and fill in the de		repossessed, foreclosed, garnished, a	
	<ul><li>✓ No. Go to line 11.</li><li>✓ Yes. Fill in the information below</li></ul>	ow.		
	-	or bankruptcy, did any creditor, includ refuse to make a payment because you	ing a bank or financial institution, set o u owed a debt?	ff any
	<ul><li>✓ No</li><li>✓ Yes. Fill in the details.</li></ul>			
	-	bankruptcy, was any of your property iver, a custodian, or another official?	in the possession of an assignee for the	he benefit of
	☑ No □ Yes			
Pa	rt 5: List Certain Gifts ar	nd Contributions		
13.	Within 2 years before you filed for	r bankruptcy, did you give any gifts w	ith a total value of more than \$600 per	person?
	<ul><li>✓ No</li><li>✓ Yes. Fill in the details for each</li></ul>	gift.		
	Within 2 years before you filed for to any charity?	r bankruptcy, did you give any gifts o	contributions with a total value of mor	re than \$600
	✓ No  Yes. Fill in the details for each	gift or contribution.		
Pa	rt 6: List Certain Losses	<b>s</b>		
	Within 1 year before you filed for other disaster, or gambling?	bankruptcy or since you filed for bank	kruptcy, did you lose anything because	of theft, fire,
	<ul><li>✓ No</li><li>✓ Yes. Fill in the details.</li></ul>			

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Debtor 1

**Timothy** First Name John

Dokement

Page 39 ofa5e7humber (if known)

Middle Name

Last Name

Part 7: List Certain Payments or Transfers

16.	anyone you consulted a	bou	t seeking bar	ptcy, did you or anyone else acting on your behalf pay nkruptcy or preparing a bankruptcy petition? preparers, or credit counseling agencies for services requir		
	☐ No ☑ Yes. Fill in the details	s.				
John L. McClain and Associates				Description and value of any property transferred plus 360 for filing fee and credit report	Date payment or transfer was made	Amount of payment
PO Num	Box 123 ber Street			=	02/2016	\$500.00
<b>Nar</b>	berth P.	<b>A</b>	<b>19072</b> ZIP Code	-		
,	il or website address			-		
		ı file	ed for bankru	- otcy, did you or anyone else acting on your behalf pay		perty to
	anyone who promised to Do not include any payme			vith your creditors or to make payments to your creditor you listed on line 16.	ors?	
	✓ No ☐ Yes. Fill in the details	s.				
8.				uptcy, did you sell, trade, or otherwise transfer any pro se of your business or financial affairs?	pperty to anyone, ot	her than
	-			s made as security (such as granting of a security interest lave already listed on this statement.	or mortgage on your	property).
	✓ No ☐ Yes. Fill in the details	S.				
19.	you are a beneficiary?			ruptcy, did you transfer any property to a self-settled to called asset-protection devices.)	rust or similar devic	ce of which
	✓ No ☐ Yes. Fill in the details	s.				

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Debtor 1

John

Page 40 of 5-7 number (if known) **Timothy** Dokement First Name Middle Name Last Name

P	Part 8: List Certain Finar	cial Accounts, Instruments, Safe Deposit Boxes, and Storage Units
20.	<ol><li>Within 1 year before you filed f benefit, closed, sold, moved, o</li></ol>	or bankruptcy, were any financial accounts or instruments held in your name, or for your ransferred?
		y market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage ives, associations, and other financial institutions.
	<ul><li>✓ No</li><li>✓ Yes. Fill in the details.</li></ul>	
21.	21. Do you now have, or did you have for securities, cash, or other variations.	ave within 1 year before you filed for bankruptcy, any safe deposit box or other depository iluables?
	<ul><li>✓ No</li><li>✓ Yes. Fill in the details.</li></ul>	
22.		storage unit or place other than your home within 1 year before you filed for bankruptcy?
	✓ No ☐ Yes. Fill in the details.	
Ρ	Part 9: Identify Property	You Hold or Control for Someone Else
23.	23. Do you hold or control any pro or hold in trust for someone.	perty that someone else owns? Include any property you borrowed from, are storing for,
	✓ No ☐ Yes. Fill in the details.	
P	Part 10: Give Details Abou	t Environmental Information
or	For the purpose of Part 10, the follo	wing definitions apply:
I	hazardous or toxic substance, w	ederal, state, or local statute or regulation concerning pollution, contamination, releases of astes, or material into the air, land, soil, surface water, groundwater, or other medium, controlling the cleanup of these substances, wastes, or material.
		or property as defined under any environmental law, whether you now own, operate, or utilize it, including disposal sites.
	-	ning an environmental law defines as a hazardous waste, hazardous substance, toxic collutant, contaminant, or similar item.
Rep	Report all notices, releases, and pro	oceedings that you know about, regardless of when they occurred.
24.	24. Has any governmental unit not law?	ified you that you may be liable or potentially liable under or in violation of an environmental
	<ul><li>✓ No</li><li>✓ Yes. Fill in the details.</li></ul>	
25.	25. Have you notified any governm  ✓ No	ental unit of any release of hazardous material?

Yes. Fill in the details.

Del	Case 16-10933-eif Doc 1 Filed 02/13/16 Entered 02/13/16 06:50:22 Desc Main otor 1 Timothy John Dokennent Page 41 of 5-7 number (if known) 02/12/2016 01:49:03pm First Name Middle Name Last Name
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.
	✓ No  Yes. Fill in the details.
Р	art 11: Give Details About Your Business or Connections to Any Business
27.	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?
	<ul> <li>A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time</li> <li>A member of a limited liability company (LLC) or limited liability partnership (LLP)</li> <li>A partner in a partnership</li> <li>An officer, director, or managing executive of a corporation</li> <li>An owner of at least 5% of the voting or equity securities of a corporation</li> </ul>
	<ul><li>✓ No. None of the above applies. Go to Part 12.</li><li>✓ Yes. Check all that apply above and fill in the details below for each business.</li></ul>
28.	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.
	□ No □ Yes. Fill in the details below.
Р	art 12: Sign Below
tha pro	eve read the answers on this <i>Statement of Financial Affairs</i> and any attachments, and I declare under penalty of perjury t answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or perty by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
X	/s/ Timothy John Keer X /s/ Clara M. Keer
	Timothy John Keer, Debtor 1 Clara M. Keer, Debtor 2
	Date
Did	you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
ىن	No Yes
Did	you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?
	No Yes. Name of person Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Document

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B2030 (Form 2030) (12/15)

## **UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF PENNSYLVANIA** PHILADELPHIA DIVISION

In re	e Timothy John Keer Clara M. Keer	Case No.	
		Chapter	13
	DISCLOSURE OF COMPENSATION OF A	TTORNEY FOR	DEBTOR
tl s	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that that compensation paid to me within one year before the filing of the petit services rendered or to be rendered on behalf of the debtor(s) in contems as follows:	ion in bankruptcy, or a	agreed to be paid to me, for
F	For legal services, I have agreed to accept	\$6	6,500.00
F	Prior to the filing of this statement I have received		\$500.00
Е	Balance Due	\$6	5,000.00
2. T	The source of the compensation paid to me was:  ☐ Debtor ☐ Other (specify)		
3. T	The source of compensation to be paid to me is:		
	✓ Debtor ☐ Other (specify)		
4.	✓ I have not agreed to share the above-disclosed compensation with a associates of my law firm.	any other person unles	ss they are members and
	I have agreed to share the above-disclosed compensation with anot associates of my law firm. A copy of the agreement, together with a compensation, is attached.		
5. lr	n return for the above-disclosed fee, I have agreed to render legal service	ce for all aspects of the	e bankruptcy case, including:
	<ul> <li>Analysis of the debtor's financial situation, and rendering advice to the pankruptcy;</li> </ul>	e debtor in determininç	g whether to file a petition in
b	o. Preparation and filing of any petition, schedules, statements of affairs	and plan which may b	pe required;
С	c. Representation of the debtor at the meeting of creditors and confirmat	tion hearing, and any	adjourned hearings thereof;

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B2030 (Form 2030) (12/15)

Timothy John Keer

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Non-Base Attorney Fees. In some Chapter 13 cases, the legal services which are beyond those contemplated in the base fee but must nonetheless be provided by the Attorney prior to or subsequent to confirmation, the client may be charged non-base fees that include: Preparation and filing of amended schedules; Motion to extend stay; Motion to abate or modify plan; Defense of motion to dismiss the case; Defense of Motion to lift any stay; Motion to sell real or personal property; motion to avoid lien; Conversion from chapter 7 to chapter 13; Conversion from chapter 13 to chapter 7; Preparing and filing answers to motion for relief (post confirmation); Attending hearing after confirmation; Negotiation and settlement of Motion for Relief (post confirmation); Consultation regarding reaffirmation agreements; Preparation and filing suggestions of Bankruptcy; Expedited filing of Petition and Petition Schedules; Affidavit of Change of Circumstances; Response to extraordinary requests for information by trustee; mortgae modification approval,; Non-routine services which include fees for representation for adversary actions and negotiation with

trustee (hourly); Any other matter not covered by the base fee (hourly).

1	СF	D.		=1	$\sim 1$	١т		N	i
١,		ĸ	116	- 11		<b>→</b> I	ĸ	ııv	

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

02/12/2016 /s/ John L. McClain Date John L. McClain Bar No. 56081 John L. McClain and Associates PO Box 123 Narberth, PA 19072 Phone: (215) 893-9357 / Fax: (888) 857-1967 /s/ Timothy John Keer /s/ Clara M. Keer

Clara M. Keer

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UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF PENNSYLVANIA PHILADELPHIA DIVISION

IN RE: Timothy John Keer

Clara M. Keer

CASE NO

CHAPTER 13

# **VERIFICATION OF CREDITOR MATRIX**

know	The above named Debtor hereby verifies that the redge.	attached l	list of creditors is true and correct to the best of his/her
Date	2/12/2016	Signature	/s/ Timothy John Keer Timothy John Keer
Date	2/12/2016	Signature	/s/ Clara M. Keer

Clara M. Keer

Clara M. Keer 921 Haldeman Rd Schwenksville, PA 19473

Credit One Bank Na PO Box 98873 Las Vegas, NV 89193

Ditech Financial LLC PO Box 6172 Rapid City, SD 57709

Fingerhut 6250 Ridgewood Rd St Cloud, MN 56303

GREENTREE SERVICING LLC/ Ditech 345 ST. PETER STREET 1100 LANDMARK TOWERS ST. PAUL, MN 55102

John L. McClain and Associates PO Box 123 Narberth, PA 19072

KML Law Group, PC 701 Market Street Philadelphia, PA 19106-1532

Raymond Kessler, Esquire 644 Bloom Street Danville, PA 17821

Snap On Crdt
Attn: Bankruptcy
950 Technology Way Suite 301
Libertyville, Il 60048

Timothy John Keer 921 Haldeman Rd Schwenksville, PA 19473

Unifund CCR LLC 10625Techwoods Circle Cincinnati, OH 45242 Case 16-10933-elf Doc 1 Filed 02/13/16 Entered 02/13/16 06:50:22 Desc Main 02/12/2016 01:49:05pm

		Do	cument	Page 47 of	57 02/12/2016 01:4	49:0
Fill in this inf	ormation to	identify your case	<b>:</b> :		Check as directed in lines 17 and 21:	
Debtor 1	Timothy First Name	<b>John</b> Middle Name	Keer Last Name		According to the calculations required by this Statement:	
Debtor 2 (Spouse, if filing)	Clara First Name	M. Middle Name	Keer Last Name		1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).	
United States Ba	nkruptcy Court fo	or the: <b>EASTERN DIS</b>	ST. OF PENNS	SYLVANIA	✓ 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).	
Case number					3. The commitment period is 3 years.	_
(if known)					☑ 4. The commitment period is 5 years.	
					Check if this is an amended filing	
Official Form	122C-1					
		of Your Curre		Income	12/	/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

#### Part 1: **Calculate Your Average Monthly Income**

- What is your marital and filing status? Check one only.
  - Not married. Fill out Column A, lines 2-11.
  - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

Column A Column B

		Debtor 1	Debtor 2 or non-filing spouse
2.	Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$7,262.00	\$0.00
3.	Alimony and maintenance payments. Do not include payments from a spouse.	\$0.00	\$0.00
4.	All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments you listed on line 3.	\$0.00	\$0.00

Net income from operating a business, profession, or farm

	Debtor 1	Debtor 2		
Gross receipts (before all deductions)	\$0.00	\$0.00	-	
Ordinary and necessary operating - expenses	\$0.00	\$0.00	- Conv	
Net monthly income from a business profession, or farm	\$0.00	\$0.00	Copy here → \$0.00	\$0.00

Case 16-10933-elf Doc 1 Filed 02/13/16 Entered 02/13/16 06:50:22 Desc Main Page 48 of 57 Case number (if known) 02/12/2016 01:49:05pm Document Debtor 1 Timothy John Last Name First Name Middle Name Column A Column B Debtor 1 Debtor 2 or non-filing spouse Net income from rental and other real property Debtor 1 Debtor 2 \$0.00 \$0.00 Gross receipts (before all deductions) \$0.00 \$0.00 Ordinary and necessary operating expenses Copy \$0.00 \$0.00 here -\$0.00 \$0.00 Net monthly income from rental or other real property Interest, dividends, and royalties \$0.00 \$0.00 **Unemployment compensation** \$0.00 \$0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: ...... \$0.00 For you..... \$0.00 For your spouse..... Pension or retirement income. Do not include any amount received that \$0.00 \$0.00 was a benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. Total amounts from separate pages, if any. 11. Calculate your total average monthly income. Add lines 2 through 10 for each column. \$7,262.00 \$0.00 \$7,262.00 Then add the total for Column A to the total for Column B. Total average monthly income Part 2: **Determine How to Measure Your Deductions from Income** \$7,262.00 12. Copy your total average monthly income from line 11. 13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below.  $\square$ You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. \$0.00 \$0.00 Total..... Copy here

14. Your current monthly income. Subtract the total in line 13 from line 12.

\$7,262,00

Deb	tor 1	<u>Ti</u>	e 16-1093 mothy st Name	Joh		Docu Ke	02/13/3 ment er				6:50:22		<b>1ain</b> /2016 01:49:05p
15.	Calc	ulate	your current	monthly i	ncome for	the vear	Follow the	ese stens:					
			y line 14 here	-		•		•					\$7,262.00
			iply line 15a b	_								x	12
	15h		result is your					s part of the	e form			9	87,144.00
16.			the median fa										<u> </u>
			n the state in v	•	•	, p		ennsylvar					
	16b.	Fill i	n the number	of people	in your hou	usehold.		2					
	16c.		n the median t		-		d size of ho	ousehold				9	558,187.00
	100.	To fi	ind a list of ap ructions for this	plicable m	edian inco	me amoun	ıts, go onlir	ne using the	e link specifi	ed in the sep		<u></u> -	
17.	How	do th	e lines comp	are?									
	17a.		Line 15b is le under 11 U.S		•			. •			Disposable inc e Income (Off		
	17b.		Line 15b is m 11 U.S.C. § 1 On line 39 of	1325(b)(3)	Go to Pa	rt 3 and fil	ll out Calc	ulation of \	our Dispos		income is de (Official For		der
D	art 3:		Calculate Y	·	,,,		,			)/ <i>4</i> )			
			total average						•				\$7,262.00
19.	<b>Ded</b> uthat of	educt the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend at calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's come, copy the amount from line 13.											
	19a.	If the	e marital adjus	stment doe	es not appl	y, fill in 0 o	n line 19a.						\$0.00
			tract line 19a										\$7,262.00
20.	Calc	ulate	your current	monthly i	ncome for	the year.	Follow the	ese steps:					
	20a.	Cop	y line 19b										\$7,262.00
		Mult	iply by 12 (the	number o	of months in	n a year).						X	12
	20b.	The	result is your	current mo	onthly inco	me for the	year for thi	s part of the	e form.				87,144.00
	20c.	Cop	y the median f	family inco	me for you	ur state and	d size of ho	usehold fro	om line 16c.				558,187.00
21.	How	do th	e lines comp	are?									
			20b is less that box 3, <i>The co</i>				-		the top of p	age 1 of this	form,		
			20b is more that s form, check b					-		the top of pa	age 1		
P	art 4:	9	Sign Below	1									
	By si	igning	here, under po	enalty of p	erjury I de	clare that t	he informa	tion on this	statement a	nd in any atta	achments is tr	ue and corre	ect.
	V /9	s/ Tim	othy John k										
									/ Clara M.				
			John Keer, D						/ Clara M. I ara M. Keer,				

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

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Fill in this information to identify your case:									
Debtor 1	Timothy	John	Keer						
	First Name	Middle Name	Last Name						
Debtor 2	Clara	M.	Keer						
(Spouse, if filing)	First Name	Middle Name	Last Name						
United States Bankruptcy Court for the: <b>EASTERN DIST. OF PENNSYLVANIA</b>									
Case number (if known)									

☐ Check if this is an amended filing

### Official Form 122C-2

## Chapter 13 Calculation of Your Disposable Income

12/15

To fill out this form, you will need your completed copy of Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period (Official Form 122C-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

#### Part 1: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 122C-1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 122C-1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

2

National Standards You must use the IRS National Standards to answer the questions in lines 6-7.

**6. Food, clothing and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

\$1,092.00

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age					
7a. Out-of-pocket health care allowance per person	\$60.00				
7b. Number of people who are under 65	x2	Сору			
7c. <b>Subtotal.</b> Multiply line 7a by line 7b.	\$120.00	here -	\$120.00		
People who are 65 years of age or older					
7d. Out-of-pocket health care allowance per person	\$144.00				
7e. Number of people who are 65 or older	x <u>0</u>	Copy			
7f. <b>Subtotal.</b> Multiply line 7d by line 7e.	\$0.00	here -	+\$0.00	Сору	
7g. <b>Total.</b> Add lines 7c and 7f			\$120.00	here -	\$120.00

Case 16-10933-elf Doc 1 Filed 02/13/16 Entered 02/13/16 06:50:22 Desc Main Page 51 of 57 Case number (if known) 02/12/2016 01:49:05pm Doçument Debtor 1 **Timothy** John First Name Middle Name Last Name **Local Standards** You must use the IRS Local Standards to answer the questions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: ■ Housing and utilities -- Insurance and operating expenses ■ Housing and utilities -- Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities -- Insurance and operating expenses: Using the number of people you entered in line 5, \$607.00 fill in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities -- Mortgage or rent expenses: \$1,682.00 9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment **GREENTREE SERVICING LLC** \$1,500.00 Repeat this Copy amount on 9b. Total average monthly payment \$1,500.00 \$1,500.00 here line 33a. 9c. Net mortgage or rent expense. Copy Subtract line 9b (total average monthly payment) from line 9a (mortgage or \$182.00 \$182.00 here rent expense). If this number is less than \$0, enter \$0. 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim. Explain why: 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. ☐ 0. Go to line 14. 1. Go to line 12.

2 or more. Go to line 12.

12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the

operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area.

\$598.00

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Debtor 1 **Timothy** John First Name Middle Name Last Name

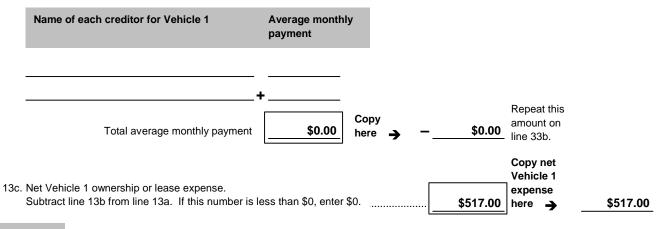
13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on

# the vehicle. In addition, you may not claim the expense for more than two vehicles. Vehicle 1 **Describe Vehicle 1:** 13a. Ownership or leasing costs using IRS Local Standard. ...... \$517.00

Do not include costs for leased vehicles.

13b. Average monthly payment for all debts secured by Vehicle 1.

To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.



#### Vehicle 2 Describe Vehicle 2:

Name of each creditor for Vehicle 2

- \$517.00 13d. Ownership or leasing costs using IRS Local Standard. ......
- 13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles.

		payment								
	Total average monthly payment	\$0.00	Cop her		_	•	\$0.00	Repea amou line 33	nt on	
13f	. Net Vehicle 2 ownership or lease expense. Subtract line 13e from 13d. If this number is less	than \$0, enter \$0.					\$517.00	Copy Vehic exper here	le 2 nse	 \$517.00
ъ.	http://www.dailan.com	Calcada Para 44ata		IDO			landa Cura (		,.	40.0

Average monthly

- 14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the Public Transportation expense allowance regardless of whether you use public transportation.
- 15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for Public Transportation.

\$0.00

Case 16-10933-elf Doc 1

Timothy First Name Debtor 1 John Middle Name Last Name

Othe	er Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly exper following IRS categories.	ises for the							
16.	<b>Taxes:</b> The total monthly amount that you actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. Do not include real estate, sales, or use taxes.	\$1,618.00							
17.	<b>Involuntary deductions:</b> The total monthly payroll deductions that your job requires, such as retirement contribution union dues, and uniform costs.  Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.	<b>\$0.00</b>							
18.	<b>Life insurance:</b> The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance.  Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.	\$0.00							
19.	<b>Court-ordered payments:</b> The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments.  Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35	<u></u> _							
20.	Education: The total monthly amount that you pay for education that is either required:     ■ as a condition for your job, or     ■ for your physically or mentally challenged dependent child if no public education is available for similar services.								
21.	<ul> <li>for your physically or mentally challenged dependent child if no public education is available for similar services.</li> <li>Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.</li> <li>Do not include payments for any elementary or secondary school education.</li> </ul>								
22.	22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. Payments for health insurance or health savings accounts should be listed only in line 25.								
23.	23. Optional telephones and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer.  Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.								
24.	Add all of the expenses allowed under the IRS expense allowances.  Add lines 6 through 23.	\$5,251.00							
Add	Itional Expense Deductions  These are additional deductions allowed by the Means Test.  Note: Do not include any expense allowances listed in lines 6-24.								
25.	<b>Health insurance, disability insurance, and health savings account expenses.</b> The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents.								
	Health insurance \$78.00								
	Disability insurance \$0.00								
	Health savings account + \$0.00								
	Total \$78.00 Copy total here →	\$78.00							
	Do you actually spend this total amount?								
	No. How much do you actually spend?  ✓ Yes								
26.	26. Continued contributions to the care of household or family members. The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may include contributions to an account of a qualified ABLE program. 26 U.S.C. § 529A(b).								
27. Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply.  By law, the court must keep the nature of these expenses confidential.									

	Ca	se 16-1093	33-elf	Doc 1	Filed 02/13/16		d 02/	13/16 06:50:22	Des	<mark>c Main</mark> 2/12/2016 01:49:05pr
ebto	r 1	Timothy First Name	<b>Joh</b> Midd	n le Name	Document Keer Last Name		Case n	umber (if known)		
28.	Addit	ional home ene	rgy costs.	Your home	energy costs are inclu	ded in your ins	urance	and operating expenses		
	on line	e 8.								
		believe that you, then fill in the e				he home ener	gy costs	s included in expenses o	n	
		nust give your ca nt claimed is rea			tion of your actual expe y.	nses, and you	must s	how that the additional		
29.	\$156.		at you pay	or your dep				expenses (not more than ars old to attend a private	e or	\$0.00
					tion of your actual expe ot already accounted fo		must e	xplain why the amount		
	* Subj	ject to adjustmer	nt on 4/01/	6, and ever	ry 3 years after that for	cases begun o	on or aft	er the date of adjustmen	t.	
30.	highe	r than the combin	ned food a	nd clothing		lational Stand		and clothing expenses a hat amount cannot be m		
			-		onal allowance, go onlir o be available at the ba	-		•		
	You m	nust show that th	e additiona	al amount cl	aimed is reasonable ar	d necessary.				
31.					amount that you will co			the form of cash or final	ncial 🕇	\$0.00
	Do no	t include any am	nount more	than 15% o	of your gross monthly in	come.				
32.		all of the additionnes 25 though 3	-	se deductio	ons.					\$78.00
Ded	uction	s for Debt Payn	nent							
33.			-		in property that you o	wn, including	home r	mortgages, vehicle		
					ent, add all amounts th Then divide by 60.	at are contrac	ually du	e to each secured credit	or in	
							A۱	erage monthly		
							pa	yment		
	00-	Mortgages on	•					\$1,500.00		
	33a.						→	Ψ1,300.00		
	00:	Loans on your					_	\$0.00		
		. ,						\$0.00		
	33c.						→	Ψ0.00		
	33d.	List other secur				-		_		
1		of each credito secured debt	or for		entify property that cures the debt	Does pay include t insuranc	axes or			
	Snap	On Crdt		to	ols		No Yes	\$41.15		
	llw:t-	ind CCB I I C		L -	amo.	<b>☑</b>	No	¢EO NE		
	UIIIIL	ind CCR LLC		<u>nc</u>	ome		Yes	\$58.05		
							No _			
							Yes			
								\$1,599.20 Copy	y total	\$1,599.20

35. Do you owe any priority claims—such as a priority tax, child support, or alimony—that are past due as of the filing date of your bankruptcy case?  11 U.S.C. § 507.  No. Go to line 36.  Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.  Total amount of all past-due priority claims	Debto	or 1 <u>Tim</u>	16-10933-6 nothy Name	John Middle Name	Filed 02/13 Document Keer	3/16 Ente Page 5	ered 02/ 55 of 57 Case n	/13/16 06:50 umber (if known)	):22 Des	sc Main 02/12/2016 01:49:05
possession of your property (called the cure amount). Next, divide by 60 and fill in the information below.  Name of the creditor identify property that socures the debt amount Monthly cure amount.  GREENTREE SERVICING L home \$40,000.00 ÷ 60 = \$666.67	34.	necessary  No.	for your suppo Go to line 35.	rt or the support	of your depende	ents?				
Secures the debt  Secures the		<b>V</b>	•		•					
+ 60 = +  Total \$666.67 Copy total here → \$666.67  35. Do you owe any priority claims—such as a priority tax, child support, or alimony—that are past due as of the filling date of your bankruptcy case?  11 U.S.C. § 507.  No. Go to line 36.  Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.  Total amount of all past—due priority claims.  Total amount of all past—due priority claims.  Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts).  To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the barkruptycy clerk's office.  Average monthly administrative expense  37. Add all of the deductions for debt payment.  Add lines 33g through 36.  Total Deductions from Income  38. Add all of the allowed deductions.  Copy line 24, All of the expenses allowed under IRS expense allowances.  \$5,251.00  \$78.00  Copy total here → \$2,360.87  Total deductions  \$7,689.87  Total deductions  \$7,689.87  Part 2: Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2)  39. Copy your total current monthly income from line 14 of Form 122C-1, Chapter 13	Nam	ne of the cr	editor					•		
\$666.67    Total   \$666.67   \$666.6	GRI	EENTREE	SERVICING L	home		\$40,000.00	÷ 60 =	\$666.67		
Total \$666.67  35. Do you owe any priority claims—such as a priority tax, child support, or alimony—that are past due as of the filling date of your bankruptcy case?  11 U.S.C. § 507.  No. Go to line 36.  Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.  Total amount of all past-due priority claims. Such as those you listed in line 19.  Total amount of all past-due priority claims. \$4,500.00 ÷ 60 = \$75.00  36. Projected monthly Chapter 13 plan payment  Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Trustees (for all other districts).  To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.  Average monthly administrative expense  37. Add all of the deductions for debt payment.  Add all of the deductions for debt payment.  Add all of the allowed deductions.  Copy line 32, All of the expenses allowed under IRS expense allowances							÷ 60 =			
Total \$666.67    No. Go to line 36.   Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.    Total amount of all past-due priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.    Total amount of all past-due priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.    Total amount of all past-due priority claims. S4,500.00							÷ 60 = +			
alimony—that are past due as of the filling date of your bankruptcy case?  11 U.S.C. § 507.  No. Go to line 36.  Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.  Total amount of all past-due priority claims.  Sq. 500.00  36. Projected monthly Chapter 13 plan payment  Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts).  To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.  Average monthly administrative expense  37. Add all of the deductions for debt payment.  Add lines 33g through 36.  Total Deductions from Income  38. Add all of the allowed deductions.  Copy line 24, All of the expenses allowed under IRS expense allowances							Total	\$666.67		\$666.67
Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.  Total amount of all past-due priority claims. \$4,500.00 ÷ 60 = \$75.00  36. Projected monthly Chapter 13 plan payment \$250.00  Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts).  To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.  Average monthly administrative expense \$20.00  Total Deductions from Income  37. Add all of the deductions for debt payment.  Add all of the allowed deductions.  Copy line 24, All of the expenses allowed under IRS expense allowances. \$5,251.00  Copy line 32, All of the deductions for debt payment.  Total deductions  Total deductions  \$78.00  Copy line 37, All of the deductions for debt payment.  Total deductions  \$7,689.87  Part 2: Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2)  39. Copy your total current monthly income from line 14 of Form 122C-1, Chapter 13	35.	alimonyt	hat are past due							
36. Projected monthly Chapter 13 plan payment  Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts).  To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.  Average monthly administrative expense  \$20.00  Copy total here → \$20.00  \$20.00  Total Deductions from Income  38. Add all of the allowed deductions.  Copy line 24, All of the expenses allowed under IRS expense allowances		ш	Fill in the total a							
Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts).  To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.  Average monthly administrative expense  37. Add all of the deductions for debt payment.  Add lines 33g through 36.  \$20.00  Copy total here \$20.00  \$20.00  \$20.00  Total Deductions from Income  38. Add all of the allowed deductions.  Copy line 24, All of the expenses allowed under IRS expense allowances			Total amount of	all past-due prior	ty claims			\$4,500.00	÷ 60 =	\$75.00
Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts).  To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.  Average monthly administrative expense  37. Add all of the deductions for debt payment.  Add lines 33g through 36.  Total Deductions from Income  38. Add all of the allowed deductions.  Copy line 24, All of the expenses allowed under IRS expense allowances	36.	Projected	monthly Chapte	er 13 plan payme	nt			\$250.00		
specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.  Average monthly administrative expense \$20.00 here → \$20.00 he		Office of th	ne United States	Courts (for district	s in Alabama and	d North Carolina				
Average monthly administrative expense \$20.00  37. Add all of the deductions for debt payment. Add lines 33g through 36.  \$2,360.87  Total Deductions from Income  38. Add all of the allowed deductions.  Copy line 24, All of the expenses allowed under IRS expense allowances		specified in	n the separate ins	structions for this		-		x8	%	
Add lines 33g through 36.  \$2,360.87  Total Deductions from Income  38. Add all of the allowed deductions.  Copy line 24, All of the expenses allowed under IRS expense allowances		Average m	nonthly administra	ative expense				\$20.00		\$20.00
38. Add all of the allowed deductions.  Copy line 24, All of the expenses allowed under IRS expense allowances	37.			for debt paymen	i.					\$2,360.87
Copy line 24, All of the expenses allowed under IRS expense allowances	Tota	al Deductio	ns from Income							
Copy line 32, All of the additional expense deductions	38.	Add all of	the allowed ded	luctions.						
Copy line 37, All of the deductions for debt payment		Copy line 2	24, All of the exp	enses allowed un	der IRS expense	allowances		\$5,251.00		
Total deductions  Copy total here \$7,689.87  Part 2: Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2)  39. Copy your total current monthly income from line 14 of Form 122C-1, Chapter 13		Copy line 3	32, All of the add	litional expense de	eductions					
Part 2: Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2)  39. Copy your total current monthly income from line 14 of Form 122C-1, Chapter 13		Copy line 3	37, All of the ded	luctions for debt p	ayment		+	\$2,360.87	Comutatal	
39. Copy your total current monthly income from line 14 of Form 122C-1, Chapter 13		Total dedu	ctions					\$7,689.87		\$7,689.87
39. Copy your total current monthly income from line 14 of Form 122C-1, Chapter 13	Par	t 2: Do	etermine You	ır Disposable	Income Unde	er 11 U.S.C. §	§ 1325(b)	(2)		
Statement of Your Current Monthly Income and Calculation of Commitment Period. \$7,262.00	39.			-			-			\$7,262.00

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Debto	r 1 <u>Timot</u> First Na		Joh Midd	In lle Name	Last Nam	e		Case	number (if know	n)	
40.	The monthly a disability pays	average of ments for in accord	of any chile r a depend dance with	d support pa ent child, re applicable i	you receive for ayments, foste eported in Part nonbankruptcy uch child.	r care pa 1 of Forr	yments, or n 122C-1, t		ldren.	_	
41.	your employe	er withhele ecified in	d from wag 11 U.S.C.	ges as contr § 541(b)(7)	The monthly ibutions for que plus all require S.C. § 362(b)(1	alified re d repayr	tirement		\$0.0	0_	
42.					J.S.C. § 707(b			→	\$7,689.8	<u>7</u>	
43.	expenses and circumstance	d you haves and the	ve no reas eir expense	onable alter es. You mu	special circum native, describ st give your ca d documentati	e the spo	ecial e a detaile	d			
	Describe th	ne specia	al circums	tances	А	mount o	f expense				
						<u> </u>					
					Total		\$0.00 L.	copy nere ⋺	+\$0.0	<u>0</u>	
44.	Total adjustr	ments.	Add lines 4	10 through 4	13			<del>2</del>	\$7,689.8	Copy here	<b>→</b> \$7,689.87
45.	Calculate yo	ur montl	hly dispos	able incom	ne under § 132	25(b)(2).	Subtract li	ne 44 fror	m line 39.		(\$427.87)
Par	t 3: Cha	nge in	Income	or Expen	nses						
46.	virtually certa information b	iin to cha elow. Fo	nge after to or example	he date you , if the wage	filed your ban es reported inc	kruptcy p reased at	etition and fter you file	during the	eported in this fo e time your case tition, check 122 occurred, and fill	will be open C-1 in the fire	, fill in the st column, enter
	Form	Line	Reason	for change				Date of	_	Increase or decrease?	Amount of change
	122C-1									☐ Increase	
	☐ 122C-2								_	Decreas	
	☐ 122C-1 ☐ 122C-2									☐ Increase ☐ Decreas	
	☐ 122C-1									☐ Increase	
	122C-2		-							☐ Decreas	
	122C-1									☐ Increase	
	☐ 122C-2									☐ Decreas	e

Entered 02/13/16 06:50:22 Desc Main 02/12/2016 01:49:05pm Case 16-10933-elf Doc 1 Filed 02/13/16 Page 57 of 57 Case number (if known) Document Keer Debtor 1 **Timothy** John Last Name First Name Middle Name Part 4: Sign Below By signing here, under penalty of perjury you declare that the information on this statement and in any attachments is true and correct. χ /s/ Timothy John Keer X /s/ Clara M. Keer Timothy John Keer, Debtor 1 Clara M. Keer, Debtor 2

Date 2/12/2016

MM / DD / YYYY

Date 2/12/2016

MM / DD / YYYY